APPLICATION FOR SPECIAL **DESIGNATED LICENSE** CITY OF LINCOLN CITY CLERK'S OFFICE 555 S 10TH ST LINCOLN NE 68508 PHONE: (402) 441-7438 DO YOU NEED POSTERS? YES NO RETAIL LICENSE HOLDER NON PROFIT APPLICANT Non Profit Status (check one that best applies): Municipal Political Fine Arts Fraternal Religious Charitable Public Service **COMPLETE ALL QUESTIONS** Beer Wine Distilled Spirits 1. 2. Liquor license number and class (i.e. C55441, CK55441) CK104580 (If you're a nonprofit organization leave blank) Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on 3. your liquor license) NAME: SMG FOOD & BEVERAGE LLC 300 CONSHOHOCKEN STATE ROAD ADDRESS: WEST CONSHOHOCKEN CITY: ZIP: 19428 4. Location where event will be held; name, address, city, county, zip code PINNACLE BANK ARENA **BUILDING NAME:** 400 PINNACLE ARENA DRIVE ADDRESS: LINCOLN CITY: ZIP: 68408 **COUNTY & COUNTY #:** LANCASTER Is this location within the city/village limits? a. YES✓ NO b. is this location within the 150' of church, school, hospital or home YES NO 🗸 for aged/indigent or for veterans and/or wives?

Is this location within 300' of any university or college campus

NO

YES

	Date(s) and					
e !7.2	2015	Date	Date	Date	Date	Date
Irs M		Hours From To	Hours From	Hours From	Hours From	Hours From
РМ		10	То	То	То	То
	a. Alte	nate date:	N/A			
	b. Alter	nate location:	N/A	t be specified in lo	cal approval)	·····
	Indicate typ Dance Other:	e of activity to Reception	pe carried on c		Beer Garden	Sampling/Tasti ng
	Description	of area to be li	censed		v	
	*Outdeen or	, Ital casisacaib as	140 26 124 2	covered IN FEET (recovered IN FEET covered IN FEET coh copy of sketch)	tron tarking=	460 X 453 See 11
,	*Outdoor an *SKETCH C	, Ital casisacaib as	of area to be of AREA (or atta No. Sq. Ft. 7.503 Sq. Ft	covered IN FEET	tron tarking=	1=965x113" =965x113" =965x113" =1652 × 406 Bridge=2,082 × 18
	*Outdoor are *SKETCH C	ea dimensions F OUTDOOR 579,΄ 2Ψ ea, how will pro	of area to be of AREA (or atta No. Sq. ft. 2.503 Sq. ft. emises be ence	losed?	tron Harking= X (sample sketch) Show Cours # Show Cours # Pedestrian	1=965x113") 2=652 × 406 Bridge=2,082 × 18

11.			esaler? YES[<u>✓</u>]NO[BYO[_]	1
12.	(includes wineries) Will there be any games of chance operating	a durina the e	vent? YES□NO✓	
	If so, describe activity:			
	NOTE: Only games of chance approved by the Depart forms of gambling are prohibited by State Law: There funds for a charity. This is only an application for a Spambling permit application.	are no exception	is for Non Profit Organizatio	ns or any events raising
13.	Any other information or requests for exemp event, complete NLCC form 140): 53/168/169	otions (must b	e received by Commiss	sion 30 days prior to
14.	Name and telephone number/cell phone nethe location of the event when it occurs, able enforcement before and during the event, and laws, ordinances, rules and regulations are a	e to answer ar nd who will be	ny questions from Com responsible for ensuring	mission and/or law ng that any applicable
	Print name of Event Supervisor: THOMASE.LOR	RENZ		
	Signature of Event Supervisor:			
	Event Supervisor phone: Before 402.904.44	144	During 402.416.6	i227
	Email address: liorenz@smglincoln.com			
15.	Consent of Authorized Representative/Application I declare that I am the authorized representation statements made on this application are true an investigation of my background including to waive any rights or causes of action against State Patrol or any other individual releasing Nebraska State Patrol. I further declare that the person, group, organization or corporation for supervised by persons directly responsible to	ative of the about the to the best of all records of ast the Nebrasi said information profit or not	f my knowledge and be every kind including po ka Liquor Control Com ion to the Liquor Contro plied for will not be use for profit and that the e	elief. I also consent to blice records. I agree mission, the Nebraska ol Commission or the ed by any other event will be
sign	Janes XII am	GENERAL M	ANACED	FAE DOAF
here	Authorized Representative/Applicant	Title	NYAVEN	5.15.2015 Date
	THOMAS E. LORENZ			
	Print Name			
This ind	lividual must be listed on the application as an offic	er or stockhold	er unless a letter has bee	en filed appointing an

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

individual as the catering manager allowing them to sign all SDL applications.

SUPPLEMENTAL FORM REQUIRED FOR ALL OUTDOOR EVENTS

(Including those for Non Profit Organizations)

Name of Event: GOOD GUYS ROD & CU	JSTOM CAR	SHOW		
Applicant and Sponsoring Organization or Ind	lividual (if applic	able):		
Date(s) of Event: SATURDAY, JUNE 27	7, 2015 Hours	: 8AM TO 5F	PM	
Alternate Date(s): N/A	Hours	: N/A		
Is the event open to the public? Yes	□No			
How will you ensure that minors will not be serve	ed or consume l	oeverages contai	ining alcohol: _	
TRAINED PINNACLE BANK ARENA EMPLOYEES WILL CHECK I	ID'S AND WRISTBAN)		
Will food be served? ✓ Yes No Funnel Cakes, nachos, hamburgers	If yes, pleas	e list food to be	served: POPCOF	RN, PRETZELS,
Will non-alcoholic beverages be served: If yes, please list non-alcoholic beverages to be	Yes served: BOTTL	NO E WATER AND PEPSI P	RODUCTS	
Who will serve the beverages containing alcohol Nust complete Server/Seller Applicant			OYEES	
Have the designated servers received responsible	le beverage ser	ver training?	✓Yes	No
Will there be a charge for admission?	✓ Yes	No		
In the last 12 months, have you received notice o you were the special designated licensee?			rred during an e xplain:	
Applicant's Signature		5.15.2018 Date	5	

SITE PLAN INFORMATION REQUIRED FOR ALL OUTDOOR EVENTS

Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.

necessary.	•		
1. Number	r of Entry & Exit Points & Dimensions: (@	2) 10 'χ 10 ')	
2. Size & lo	location of tent(s) (heights, width, depth)		
Size of a	area being used (_x) p.c	case See maps	
Location	n & type of cooking equipment (if used)		
drawing.	n of tables & chairs; If stage for band pro		imensions on
6. Height &	& type of fencing to be used. Le Foot Ce	nce chainlink	
Note: Two (2 patrons into	2) exit points must be indicated on the building. Questions relating to directed to: Chuck Schweitzer, Fire	your drawing. These exits <u>canno</u> to entry/exit points; electrical wiri	ng: tent
	NOTE: WE WILL BE USIN	IG 6' CHAIN LINK FENCE	
	PLEASE SEE THE FOLLO	WING MAP	
The state of the s			

SERVER/SELLER APPLICANT INFORMATION SHEET

You must provide the NAME and DATE OF BIRTH of ALL Employees/Volunteers who will sell or dispense alcoholic beverages at your event.

This applies to nonprofit corporations as well.

NAME	DATE OF BIRTH	PHONE # DURING EVENT	EMPLOYEE OF WHOLESALE DISTRIBUTOR YES OR NO
THE CITY CLERK'S OFFICE HAS THE	LIST ON	FILE	















